Foster Family Home - Deficiency Report

Provider ID: 1-100117

Home Name: Teodora Unciano, NA Review ID: 1-100117-10

94-471 Hiapaiole Loop Reviewer: Julie Hastings

Waipahu HI 96797 Begin Date: 10/8/2017

Foster Family Home Required Certificate [11-800-6]

6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

6.(d)(1)

Home inspection completed for a 2 person CCFFH recertification

Corrective Action Report issued during home inspection with all approved written corrections due to by 11/8/2021.

Foster Family Home Fire Safety [11-800-46]

46.(b)(2) All caregivers have been trained to implement appropriate emergency procedures in the event of a fire.

Comment:

46.(b)(2)

No Fire Drill for CG#3 in 2020

Compliance Manager

Texter lum

Primary Care Giver

10/8/2021

Date

10/8/2021

Date